

# Important Facts About LCBHDS Supportive Housing Programs Fiscal Year 2016/17

- A. HUD's definition of homelessness for eligibility for LCBHDS's HUD Supportive Housing Programs (SHP)
  - a. A person must meet the defined criteria to be eligible for LCBHDS's HUD SHP:
    - i. Category 1 literally Homeless individual who lacks a fixed, regular and adequate nighttime residence, meaning:
      - 1. Has a primary nighttime residence that is a public or private place not meant for human habitation
      - Is living in a publically operated shelter designated to provide temporary living arrangements (including congregate shelters, transitional housing and hotel and motels paid for by charitable organizations or by federal, state and local government programs
      - 3. Is exiting an institution where (s)he has resided for 90 days or less and who resided in an emergency shelter or place not meant for human habitation immediately before entering the institution
      - 4. If the individual is coming from transitional housing, they must have originally come from the street or emergency shelter
      - 5. Individual must have a disability
    - ii. Must be an unaccompanied adult, no families or children can be accepted
    - iii. Must have an open record with Lancaster County BH/DS Base Service Unit
    - iv. Must be Lancaster County resident for one year or more (administrative review for any person not meeting this criteria)
- B. LCBHDS Supportive Housing Programs (see Supportive Housing Matrix for more details)
  - a. Supportive Housing Service only
    - i. Housing Search
      - 1. Community Services Group IHELP referral to provider
      - 2. Tabor Community Services PATH Critical Time Intervention long term (9 months post housing) referral to LCBHDS Housing Specialist
      - 3. The Lodge Life Services Creative Housing Solutions short term (1-3 months) and medium term (3-6 months post housing) referral to LCBHDS Housing Specialist
    - ii. Maintaining Housing
      - 1. Keystone Supportive Living Program up to two years referral to provider
      - The Lodge Life Services Supported Housing Program up to two years referral to provider
      - The Lodge Life Services PEN SHP (Polaris/Enterprise/North Star) to serve all participants of LCBHDS HUD programs from time of admission to discharge.
  - b. Rental Assistance
    - i. First Month's Rent referral to LCBHDS Housing Specialist
    - ii. Security Deposit referral to LCBHDS Housing Specialist
    - iii. Bridge Subsidy 3-6 months from titrated to 100% subsidy referral to Housing Specialist
  - c. Master Leasing up to 90 days of rent free single room occupancy referral to LCBHDS Housing Specialist

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d. Housing Contingency Funds – can provide funds for utility deposits, utility assistance, moving costs, mattresses and other housing needs – referral to LCBHDS Housing Specialist

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Supported Housing Program Name	Supportive Housing Program (SHP) (Started in 1995)	Supportive Living Program (started 1998 with the closure of Moderate CRR on College Ave)	(IHELP) (started in 2010 with the closure of the Moderate CRR at Oakview Estates)	Project Assistance for the Homeless (PATH) Critical Time Intervention Program (CTI) (Started in 2009 with grant)
Type of Housing Program	Supportive Services Only	Supportive Services Only	Supportive Services Only	Supportive Services Only
Funders	Lancaster County BHDS	Lancaster County BHDS	Lancaster County BHDS	Lancaster County BHDS's PATH Grant
Provider	The Lodge Life Services	Keystone Human Services of Lancaster	Community Services Group	Tabor Community Services
Provider Office	315 W. James Street Suite 106	1139 Wabank Road Apt H302,	790 New Holland Ave.	308 E King St Lancaster, PA
Location	Lancaster, PA 17603	Lancaster, PA 17603	Lancaster, PA 17602	17603
Provider Phone	717-368-5225	717-368-1509	717-293-5104	717-397-5182
Referral Process	Referral is made directly to provider.	Referral is made directly to provider.	Referral is made directly to	Referral is made to Lancaster
	No UR or Administrative Review	No UR or Administrative Review	provider. No UR or	County BHDS's Housing
	required.	required	Administrative Review required	Specialist. Referral must be approved by LCBHDS Deputy  Director of MH
Referral form to be	Lodge Referral Form in Fill-in Program	Keystone Supported Living Referral in	CSG IHELP Referral Form in Fill-	Supportive Housing Referral in
used	or in Fill-in Forms folder	Fill-in Program or in Fill-in Forms folder	in Program or in Fill-in Forms folder	Fill-in Program or in Fill-in Forms folder
Provider Fax	717-392-0102	717-394-0442	717-293-5104	717-399-4127
Current Program Supervisor/ Program Contact	Amanda Grosh	Brenda Mortimer	Janice Longacre	Diane Brown
Supervisor's/ Program Contact Email	Agrosh@lodgelifeservices.org	bmortimer@keystonehumanserv ices.org	longacrej@csgonline.org	dbrown@tabornet.org
Number of Full Time	2 1/2 Fulltime Direct Service Staff, 1/2	2 Fulltime direct staff, 1 supervisor	3 1/2 Fulltime direct staff, 1/2	1 direct staff for housing
Direct Service Staff	of a Supervisor	(has a 1/2 caseload)	fulltime supervisor	support
Maximum Number of People Served	60 people	28 people	20-25 people	20-25 people

Community Housing Program Name	Supportive Housing Program (SHP)	Supportive Living Program	(IHELP)	Project Assistance for the Homeless (PATH) Critical Time Intervention Program (CTI)
Approved Referral Sources	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM
Approvals Needed for Program	None	None	None	Must be approved by LCBHDS  MH Deputy Director
Criteria for Program	Open with Lancaster MH Services	Open with Lancaster MH Services	Open with Lancaster MH Services.	Must meet PATH defined homeless or at risk of homelessness: This includes all HUD defined homeless plus doubling up, motel, unaffordable and/or unsafe living conditions, jail, institutions and residential
Rental Assistance	None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance	None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance	None by Lancaster County LCBHDS, provider will assist in attaining community resources for subsidies or assistance	No rental assistance is offered, supportive services only in finding and maintaining safe and affordable housing.
Average Amount of Direct Service Time	Generally a hour to two hours per week	Generally 3 hours per week, more at needed	Generally a hour to two hours per week	In the first three months after housing, three hours per week, second three months is 1-2 hours per week, third three months would be 1-2 hours every other week
Program Hours	M-F 9AM-5PM, can be flexible depending on individual's needs	Generally M-F 8AM-9PM, Sat and Sun 9AM-5PM, flexible hours depending on person's needs	Generally M-F 8AM-8PM, weekend and later evening hours are available to meet person's needs. 24 hour Oncall is available	Housing Support is offered Mon- Fri 8.30AM - 5PM.

Community Housing	Supportive Housing Program (SHP)	Supportive Living Program	(IHELP)	Project Assistance for the
Program Name				Homeless (PATH) Critical Time
				Intervention Program (CTI)
Length of Time a	Varies by each person, generally less	3months - 2 years, additional length	up to 9-12 months for those	The program is evidence-based
Person is in the	than two years	of time based on persons' needs	who are in danger of losing	and set to end nine months
Program			their housing or those who are	after housing. The program is
			homeless	integral to link community and
				natural supports.
Types of Housing	Housing supports in maintaining	Housing supports in maintaining	Housing supports in finding	Housing supports in finding and
Supports	housing, life skills, budgeting, accessing	housing, life skills, budgeting,	and maintaining housing, life	maintaining housing, life skills,
	public transportation, promoting	accessing public transportation,	skills, budgeting, accessing	budgeting, accessing public
	natural and other community supports	promoting natural and other	public transportation,	transportation, promoting
		community supports	promoting natural and other	natural and other community
			community supports	supports

Supported Housing Program Name Name Name Name Name Name Name Na
with HC Reinvestment)    Director of MH.
Type of Housing Program  Short term subsidized Rent only Program  Rooms provided to people for not more than 90 days  Funders  Health Choices Reinvestment  Health Choices Reinvestment
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Provider Lancaster County BHDS Lancaster County BHDS and The Lodge Life Services  Provider Office Location Lancaster, PA 17603 1717-299-8027 717-847-5547 717-299-8027 717-847-5547 Referral Process Referral wast be approved by LCBHDS Deputy Director of MH Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH Lancaster County BHDS and The Lodge Life Services Lodge Lodge Life Services Lodge L
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LocationLancaster, PA 17603Lancaster, PA 17603Lancaster, PA 17603Lancaster, PA 17603Provider Phone717-299-8027717-847-5547717-299-8027717-847-5547Referral ProcessReferral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MHReferral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MHReferral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MHCounty BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MHSpecialist. Referral must Approved by LCBHDS Deputy Director of MH
Provider Phone 717-299-8027 717-847-5547 717-299-8027 717-847-5547  Referral Process Referral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH.  Referral Process Referral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH.  Referral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH.  Referral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH.  Referral is made to Lancaster County BHDS's Housing Specialist. Referral must be approved by LCBHDS Deputy Director of MH.  Director of MH
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Provider Fax 717-295-3680 717-392-0102 717-295-3680 717-392-0102
Current Program John Stygler Lisa Gockley John Stygler Lisa Gockley
Supervisor/ Program
Contact
Supervisor's/ Program jstygler@co.lancaster.pa.us lgockley@lodgelifeservices.org jstygler@co.lancaster.pa.us lgockley@lodgelifeservices.org
Contact Email g
<u> </u>
Number of Full Time none none 1 Full time staff
Direct Service Staff
Maximum Number of not limited, based on funding 4 single rooms not limited, based on funding 18-25 people will vary base
People Served availability availability needs of people opened

Community Housing Program Name	Health Choices Reinvestment Bridge Housing	Health Choices Reinvestment Master Leasing Housing	Health Choices Reinvestment Contingency Funds	Health Choices Reinvestment Supportive Housing Services
Approved Referral Sources Approvals Needed for	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, Philhaven ACT D&A Case Mgt Must be approved by LCBHDS MH	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, Philhaven ACT D&A Case Mgt Must be approved by LCBHDS MH	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, Philhaven ACT, D&A Case Mgt Must be approved by LCBHDS MH	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, D&A Case Møt Must be approved by LCBHDS
Program	Deputy Director	Deputy Director	Deputy Director	MH Deputy Director
Criteria for Program	Based on need of the person	Based on need of the person	Based on need of the person	Based on need of the person
Rental Assistance	Program can provide two to six month subsidy based on a housing plan which could include titrating rent over a period not to exceed 6 months.	Single Room Occupancy paid 100% by the program for a maximum of 90 days	Program can provide first month's rent in full	no subsidy
Average Amount of Direct Service Time	None, must be linked to other supportive services	None, must be linked to other supportive services	None, must be linked to other supportive services	Short term with the focus on finding a place and moving the person on to medium term which can be up to nine months, including the time of housing search.
Program Hours	None	None	None	M-F 8.30am-5pm

Community Housing	Health Choices Reinvestment	Health Choices Reinvestment	Health Choices Reinvestment	Health Choices Reinvestment
Program Name	Bridge Housing	Master Leasing Housing	Contingency Funds	Supportive Housing Services
				Creative Housing Solutions
Length of Time a Person is in the Program	no more than 6 months	no more that 90 days, no extensions will be considered	one time only	up to nine months from program entry
Types of Housing Supports	None, must be linked to other supportive services	None, must be linked to other supportive services	None, must be linked to other supportive services	Housing supports in finding and maintaining housing, life skills, budgeting, accessing public transportation, promoting natural and other community supports

Supported Housing Program Name	Park Avenue Project (started in 2009)	HUD Supportive Housing Programs (North Star (2009), Enterprise (2011) and Polaris(2010))	HUD Supportive Housing Services- PEN SHP (Polaris/Enterprise/North Star Supported Houisng Porgram) (started in 2016)
Type of Housing Program	Subsidized Rent only	Subsidized Rent only	Supportive Services only
Funders	Lancaster County BHDS, Community Basics and The Lodge	HUD and Lancaster County BHDS	HUD and Lancaster County BHDS
Provider	Park Ave Associates, LLC/ The Lodge	Lancaster County BHDS	The Lodge Life Services
Provider Office Location	941 Wheatland Avenue, Suite 204 Lancaster, PA 17603	150 N. Queen St Suite 610 Lancaster, PA 17603	315 W. James Street Suite 106 Lancaster, PA 17603
Provider Phone	717-735-9590	717-299-8027	717-368-5225
Referral Process	No referral taken. CHIP/P	Referral is made to Lancaster	Services are automatic once a person
	Coordinator and Deputy Director of	County BHDS's Housing Specialist.	is approved for one of LCBHDS's HUD
	MH will select candidates.	Referral must be approved by LCBHDS's Subsidized Housing	programs
Referral form to be used	No referral taken. CHIP/P	Supportive Housing Referral in Fill-	no referral needed, based on HUD
	Coordinator and Deputy Director of	in Program or in Fill-in Forms	approval
	MH will select candidates.	folder	
Provider Fax	717-509-5714	717-295-3680	717-392-0102
Current Program Supervisor/ Program Contact	Jo Raff	John Stygler	Amanda Grosh
Supervisor's/ Program Contact Email	jraff@communitybasics.com	jstygler@co.lancaster.pa.us	Agrosh@lodgelifeservices.org
Number of Full Time	10 hours per week for all residents	none	1 Full time staff
Direct Service Staff	of Park Ave. No one on one available.		
Maximum Number of	6 one bedroom apartments	47 (North Star 12, Polaris 15 and	will support the participants in the 47
People Served		Enterprise 20)	units of HUD.

Community Housing Program Name	Park Avenue Project (projected start date of Sept 2010)	Polaris HUD Housing Project (started) and Enterprise Housing (to begin in Fall of 2011)	HUD Supportive Housing Services- PEN SHP (Polaris/Enterprise/North Star Supported Houisng Porgram)
Approved Referral Sources	No referral taken. CHIP/P Coordinator and Deputy Director of MH will select candidates.	Lancaster County LCBHDS's MH Case Management and Supports Coordination, CSG Case Mgt, Nuestra Clinica CM, Philhaven ACT	no referral needed, based on HUD approval
Approvals Needed for Program	Must be approved by MH Deputy Director and Park Ave Associates, LLC	Must be approved by LCBHDS HUD Panel	Must be approved by LCBHDS HUD Panel
Criteria for Program	Must meet rental criteria of Park Ave Associates, LLC which includes criminal background check, income verification, credit check and landlord references	Must meet HUD defined Homeless - on the streets, in a homeless shelter or in an approved HUD transitional living and was on the streets or in a shelter prior to going to the transitional living	Must be a participant in LCBHDS's HUD programs
Rental Assistance	Person pays 30% of their income to Park Ave and LCBHDS pays the balance of the rent due, include all utilities except telephone.	Person pays 30% of their income to LCBHDS. The person receives an utility allowance.	N/A
Average Amount of Direct Service Time	None, must be linked to other supportive services	None, must be linked to other supportive services	Person open in services upon admission to LCBHDS's HUD programs and will remain open until the person either graduates or is discharged from the HUD program
Program Hours	None	None	M-F 8.30am-5pm

Community Housing	Park Avenue Project (projected	Polaris HUD Housing Project	HUD Supportive Housing Services-
Program Name	start date of Sept 2010)	(started) and Enterprise Housing	PEN SHP (Polaris/Enterprise/North
		(to begin in Fall of 2011)	Star Supported Houisng Porgram)
Length of Time a Person	Permanent but person is encourage	Program will support the person	until discharge from the HUD
is in the Program	to obtain other housing when	until resources are obtained to be	program
	income and recovery permit.	self sufficient in housing or if a	
		administrative determination is	
		made of lack of progress toward	
		that goal after a one year lease.	
Types of Housing	None, must be linked to other	None, must be linked to other	Housing supports in finding and
Supports	supportive services	supportive services	maintaining housing, life skills,
			budgeting, accessing public
			transportation, promoting natural
			and other community supports.
			Engagement with SHP Worker is not
			required but will remain open with
			them during the time in LCBHDS's
			LILID